

Wine Tasting Permit

Business Organization Details

Name of Business/Organization: _____

Physical Business/Organization Address: _____

Mailing Address: _____

Name of Contact Person/Producer: _____

Email: _____ Telephone Number: _____

Event Details

Name of Event: _____

Location of the Event (physical address): _____

Date of Event: From _____ To _____

Duration of Event: ☐ Annual ☐ One Day Event

Actual Event Hours: _____ am/pm Until: _____ am/pm

Projected Event Attendance: _____

Will the event include temporary signs or banners? (yes/no)

**If yes, you must submit a Temporary Sign Permit Application (Contact Community Development)*

Note: Other Permits may be required based on the type of event. Please read the special instructions carefully. You may contact the Community Development Office at (678) 382-6800.

Property Details

Name of Owner: _____

Owner's Address: _____

Email: _____ Telephone Number: _____

Note: The Wine Tasting Permit shall be issued only to an individual person, the business owner/sponsor of the event. In this case, business owner/sponsor means the person responsible for planning, producing, and conducting the special event. If a group, organization, association, or other entity is sponsoring the special event, a designated agent shall be named for purposes of the permit, and that individual shall be solely and fully responsible for compliance with all provisions of the Wine Tasting Permit.

Permit Checklist

Application Requirements:

- ☐ Wine Tasting Permit Application Information
- ☐ Applicant's Certification (Notarized)
- ☐ SAVE Affidavit (Notarized)
- ☐ Copy of a valid Dunwoody Occupational Tax Certificate
- ☐ Copy of Alcoholic Beverage Provider's Alcohol License
- ☐ Payment in full

The following requirements may be required, if applicable:

- ☐ Pouring Permit
- ☐ Background Check Consent Form
- ☐ Copy of a bona fide nonprofit organization 501-C letter

Wine Tasting Permit Applicant's Certification/Affidavit

Name of Event: _____

Brief Description of Event: _____

Address of Event: _____

I hereby agree that as a condition to the issuance of a Wine Tasting Permit, the business owner/sponsor of the Event shall indemnify and hold the City harmless from claims, demand or cause of action which may arise from activities associated with the event.

I hereby solemnly swear, subject to criminal penalties for false swearing, that the statements and answers made by me to the foregoing questions in this application for a Wine Tasting Permit, are true, and no false or fraudulent statement or answer is made herein to procure the granting of such permit.

I hereby state and understand that should a complaint be filed against the owner/sponsor of the Event for violation of any regulation associated with the application for the City of Dunwoody Wine Tasting Permit, the permit issued for the event will immediately become void and will not reissue for the same location.

Owner/Sponsor Signature: _____

Sworn and Attested before me on this _____ day of _____, 20_____.

Notary Signature/Seal: _____

Staff Use Only	
Permit #:	Administrative Fees:
FA Processed By:	FA Permit Fees:
Approved/Denied By:	Expiration Date:
Approval Date:	Denied Date:

O.C.G.A. § 50-36-1(e)(2) Affidavit Verifying Status for City Public Benefit

****This form is required for ALL LICENSES/PERMITS by State Law. Please note that all applicants who fail to submit this Affidavit must be reported by law to the Department of Community Affairs****

By executing this affidavit under oath, as an applicant for a(n) _____
[type of public benefit], as referenced in O.C.G.A. § 50-36-1, from the City of Dunwoody, Georgia, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

- 1) _____ I am a United States citizen
(Must include copy of either current State Driver's License, Passport, or Military ID)
- 2) _____ I am a legal permanent resident of the United States**
(Must include a copy of your current State Driver's License and either a copy of your Permanent Resident Card or Employment Authorization Card)
- 3) _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.**
(Must include a copy of your current State Driver's License and either a copy of your Permanent Resident Card or Employment Authorization Card)

**My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in Dunwoody, Georgia.

Signature of Applicant

Date

Printed Name of Applicant

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE ____ DAY OF _____, 20____.

NOTARY PUBLIC/SEAL

My Commission Expires: _____